



Play, Learn and Grow Together – Our Passion is Their Future

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Illness & Exclusion Policy

Policy Statement

At St Helen's Pre-School, we are committed to promoting a healthy environment and protecting the health, safety and wellbeing of all children, staff and families. We take all reasonable steps to prevent the spread of infection in accordance with the Early Years Foundation Stage (EYFS) 2025 and current UK Health Security Agency (UKHSA) guidance.

We care for children from 6 months to 5 years and ensure that our approach to health, wellbeing and infection control is responsive to each child's stage of development while maintaining consistent standards across the whole setting.

We work in close partnership with parents and carers to ensure that children who are unwell or infectious remain at home until they are well enough to return and no longer pose a risk to others.

Children Who Become Unwell at Pre-School

If a child becomes unwell during the session, staff will assess their condition and complete an Unwell Child Form (Appendix A). If a child has a temperature, sickness, diarrhoea, persistent cough, unexplained rash, unusual drowsiness, breathing difficulty, or appears generally unwell, parents or carers will be contacted and asked to collect their child promptly.

Temperatures are taken using a thermometer and recorded. Children with a raised temperature are made comfortable, kept appropriately cool and closely monitored.

If a child's temperature reaches 38°C or above and does not reduce, an emergency dose of paracetamol may be administered in line with the Medication Policy, with prior written parental consent. Medication will not be given simply to reduce a temperature in order to enable a child to remain at Pre-School.

Children who have been given paracetamol or ibuprofen prior to arrival will not be admitted as this may mask symptoms.

If urgent medical attention is required and we are unable to contact a parent or named emergency contact, emergency services will be contacted.

Teething

We recognise that teething can cause discomfort for children under 2. Staff follow our dedicated Teething Guide (Appendix C) to ensure consistent practice.

When a child displays signs of teething, staff first implement non-medical comfort measures such as cooled teething rings, additional fluids, reassurance and close observation. Observations and actions are recorded on the Teething Care Record (Appendix D).

Teething gels or herbal remedies will only be administered if supplied by parents in their original packaging, clearly labelled with the child's name, signed in according to the Medication Policy, and supported by written parental consent. All medication must be handed directly to a key person on arrival and must not be left in bags.

Paracetamol will only be considered if the child remains unsettled after non-medical strategies have been followed and documented. It will only be administered with written parental consent, signed in and countersigned by the Manager or Deputy in charge where required, and recorded in accordance with the Medication Policy. Only one dose will be given at the setting, and parents will sign the medication record on collection.

If a child develops a temperature of 38°C or above, or presents with symptoms beyond typical teething such as rash, diarrhoea, lethargy or persistent fever, parents will be contacted and asked to collect their child.

Amber teething necklaces, anklets or bracelets are not permitted due to choking and strangulation risks.

Exclusion Periods

Exclusion periods are determined in line with the most recent guidance issued by the UK Health Security Agency (UKHSA) in "Health protection in children and young people settings, including education."

St Helen's Pre-School follows the UKHSA recommended minimum exclusion periods for infectious diseases. The current UKHSA exclusion table is included below. Where national guidance is updated, the most recent published version will be followed.

Illness or Infectious Diseases	Period of Exclusion
Chicken pox/shingles	5-7 days after the onset of the rash.
Conjunctivitis	None.
Diarrhoea and/or vomiting	Children and staff should be excluded from the Pre-School until their symptoms have settled and until 48 hours after the last episode of diarrhoea or vomiting.
Glandular fever	There is no benefit in keeping children or staff off once they feel well enough to attend.
Hand, foot and mouth	None, however, whilst the child is unwell, he/she should be kept away from the Pre-School.
Head lice	None. Treatment is only required if live lice are seen in the hair (not nits (eggs)).

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Hepatitis	Hep A - Until the child feels well or until 7 days after the onset of jaundice, whichever is the later.
	Hep B - Children who develop symptoms will be too ill to be at the Pre-School
	Hep C - Usually no symptoms but care must be taken with bodily fluids if person is known to have Hep C.
HIV / Aids	Should not be restricted or excluded.
Impetigo	Until 24 hours after the start of treatment. If there is an outbreak, stop the use of sand, water, playdough and cooking activities and wash all dressing up clothes. (An outbreak is 2 or more cases of the same infectious organism in a Pre-School).
Measles, mumps and rubella	Measles - yes, until 5 days after the onset of the rash.
	Mumps - the child should be excluded for 5 days after the onset of swelling.
	Rubella - for 4 days after onset of the rash, and whilst unwell.
Meningitis	Children will be too ill to attend and there is no need to exclude siblings or other close contacts.
Molluscum contagiosum	None.
Pharyngitis/tonsillitis	If the disease is known to be caused by streptococcal (bacterial) infection the child or member of staff should be kept away from the Pre-School until 24 hours after the start of treatment. Otherwise, they should stay at home while they feel unwell.
Rashes	A child who is unwell and has a rash should visit their GP to establish the reason for it.
Ringworm (Tinea)	Children need not be excluded but spread can be prevented by good personal hygiene, regular hand washing and use of separate towels and toilet articles. Parents should be encouraged to seek treatment.
Scarlet fever / Scarletina	Once a patient has been on antibiotic treatment for 24 hours they can return, provided they feel well enough.
Slapped cheek syndrome (Erythema Infectiosum/fifth disease)	An affected child need not be excluded because they are no longer infectious by the time the rash occurs.
Scabies	Not necessary, but treatment should be commenced.
Typhoid, paratyphoid (enteric fever)	Yes, an infected child is likely to be very ill and whilst infectious unable to attend the Pre-School.
Tuberculosis (TB)	"Open" cases - until 2 weeks after treatment started. "Open" cases of drug resistant TB when the hospital physician advises. ("open" is determined by sputum samples).
Verrucae	Not necessary.
Whooping cough (Pertussis)	An affected child and unvaccinated contacts under 7 years should be excluded until they have had 5 days of antibiotics.
Worms	Not necessary.

In all cases, children must be well enough to participate in normal activities before returning.

In the case of diarrhoea and/or vomiting, children and staff must remain absent for 48 hours after the last episode, regardless of the cause.

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Where specific medical advice is provided by a healthcare professional or Public Health authority, this advice will take precedence.

The Pre-School reserves the right to request medical confirmation where there is uncertainty regarding a child's fitness to return.

Allergies & Medical Conditions

When children start at St Helen's Pre-School, parents are asked to disclose any allergies or medical conditions. Where required, an Individual Healthcare Plan (Appendix E) will be completed and overseen by the Manager and Deputy.

Ongoing or long-term medication is managed in accordance with the Medication Policy, including appropriate storage, recording and countersigning procedures.

Hygiene & Infection Control

We actively promote the "Catch it, Bin it, Kill it" approach. Children are supported to use tissues for coughs and sneezes, dispose of tissues safely, and wash their hands thoroughly using warm water and soap, particularly before eating, after toileting, and after contact with bodily fluids.

Robust hygiene routines are in place throughout the setting, including careful nappy changing procedures, cleaning of equipment. Daily cleaning takes place at the end of the day with additional cleaning and control measures put into place on the occurrence of outbreaks of infectious diseases.

Partnership with Parents

Parents must inform the Pre-School if their child develops an infectious illness and must adhere to exclusion guidance. Honest communication is essential to protect all children.

Our illness procedures, exclusion expectations and medication procedures are discussed during Welcome Meetings and included within the parent information pack.

Policy Review

This policy is reviewed annually or sooner in line with updated public health guidance.

This policy has been adopted by St Helen's Pre-School.

Signed on behalf of the setting by:

..... Chairperson

..... Manager

Date: February 2026

Illness & Exclusion Policy

This policy runs in conjunction with the following policies:

- Medications
- Safeguarding
- Health & Safety
- Parental Involvement
- Role of the Key Person & Settling In
- Accident & First Aid

Relevant Guidance and Legislation

- Public Health Agency Guidance on Infection Control in Schools and Childcare Settings
https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf
- Health Protection in Children and Young People Settings, including education
<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Appendices – Please note appendices are held at the Pre-School, please ask to view

- a) Unwell Child Form
- b) Medication Record
- c) Staff Teething Guide
- d) Teething Care Record
- e) Health Care Plan